



NEW MEXICO ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

BILL RICHARDSON

Governor

Joanna Prukop

Cabinet Secretary

Mark E. Fesmire, P.E.

Director

Oil Conservation Division

May 19, 2006

Willow Creek Resources, Inc.
P.O. Box 1309
Midland, TX 79702

Willow Creek Resources, Inc.
c/o Davis White
2206 Mora
Hobbs, NM 88240

VIA CERTIFIED MAIL, RETURN RECEIPT REQUESTED

Re: Case No. 13715: Application of the New Mexico Oil Conservation Division for an Order Willow Creek Resources, Inc. to Plug One Well and Ordering Forfeiture of Applicable Financial Assurance in Event of Operator's Non-Compliance; Eddy County, New Mexico

Ladies and Gentlemen:

You are hereby notified that the New Mexico Oil Conservation Division has filed the referenced Application (copy enclosed), seeking an Order requiring you to properly plug and abandon one well in Lea County, New Mexico, identified in said application.

A hearing on this application will take place before a Division hearing examiner on Thursday, June 8, 2006, at 8:15 a.m., in Porter Hall, First Floor, 1220 South St. Francis Drive in Santa Fe, New Mexico. At that hearing you will have an opportunity to show cause why an order should not be entered as requested in the Application. . If you intend to present evidence in opposition to this application, you must file a pre-hearing statement, as described in Division Rule 1211.B with Division Clerk, Florene Davidson, at Oil Conservation Division, 1220 South St. Francis Drive, Santa Fe, New Mexico 87505, before 5:00 P.M., Mountain Time on Thursday, June 1, 2006.

You posted a cash bond, in the amount of \$10,000, secured by a collateral assignment of an account at Lea County State Bank. That security will be forfeited if an order is entered as requested and you fail to comply therewith.

Inquiries concerning this application may be directed to the undersigned in the Santa Fe office of the Division at (505)-476-3450.

Very truly yours,

A handwritten signature in black ink, reading "David K. Brooks". The signature is written in a cursive, flowing style with a large initial "D" and a long, sweeping underline.

David K. Brooks
Assistant General Counsel

cc: Tim Gum, District Supervisor

7002 3150 0004 4924 1455

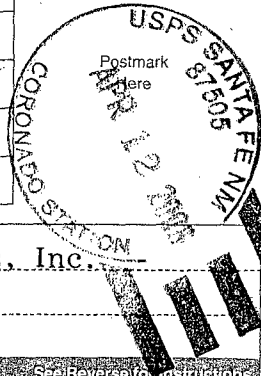
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For delivery information visit our website at www.usps.com		
OFFICIAL USE		
Postage Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Total Postage & Fees		Postmark Here
Sent To Willow Creek Resources, Inc. Street, Apt. No. P.O. Box 1309 City, State, ZIP+4 Midland, TX 79702		
PS Form 3800, June 2002		See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee B. Received by (Printed Name) AT-Step C. Date of Delivery 4/19/06 D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to: Willow Creek Resources, Inc. P. O. Box 1309 Midland, TX 79702	3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Registered <input type="checkbox"/> Insured Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Certified Mail Restricted Delivery 4. Restricted Delivery (Extra Fee) <input type="checkbox"/> Yes

2. Article Number (Transfer from service label) **7002 3150 0004 4924 1455**

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See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
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1. Article Addressed to: Willow Creek Resources, Inc. c/o Davis White 2206 Mora Hobbs, NM 88240		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
2. Article Number (Transfer from service label) 7002 3150 0004 4924 1462		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	